| PATENT | <b>APPLICATION FEE DETERMINATION F</b> | ECORD |
|--------|--|-------|
| Ŷ      | Effective October 1, 2001              |       |

Effective October 1, 2001

Application or Docket Number

20010509-0R1

| Lifective October 1, 2001                                |  |   |   |                      |                              |                     |                 | l                 | 200                    |                |                     |                        |  |
|--|--|---|---|----------------------|------------------------------|---------------------|-----------------|-------------------|------------------------|----------------|---------------------|------------------------|--|
| CLAIMS AS  |  |   | S FILED - PART I<br>(Column 1)          |                      | (Column 2)                   |                     |                 | SMALL ENTITY TYPE |                        | OR             | OTHER THAN          |                        |  |
| TOTAL CLAIMS   |  |   | 33                                      |                      |                              |                     |                 | RATE              | FEE                    |                | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED                            |                      | NUMBER EXTRA                 |                     | B/              | ASIC FEE          | 370.00                 | OR             | BASIC FEE           | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS                                  |  |   | <b>州</b> ら minus 20=                    |                      | • 25                         |                     |                 | X\$ 9=            | 225                    | OR             | X\$18=              |                        |  |
| INDEPENDENT CLAIMS                                       |  |   | 2 minus 3 =                             |                      | * 6                          |                     |                 | X42=              |                        | OR             | X84=                |                        |  |
| MULTIPLE DEPENDENT CLAIM P                               |  |   | RESENT                                  |                      | 乜                            |                     | +140=           | 140               | OR                     | +280=          |                     |                        |  |
| * If the difference in column 1 is less than zero, enter |  |   |   |                      | r "0" in c                   | olumn 2             | <u>L</u>        | TOTAL             | 735                    | OR             | TOTAL               |                        |  |
| ) [  | -9-05 <sup>CI</sup>  | LAIMS AS A<br>(Column 1)                  | AMENDED - PART II (Column 2) (Column 3) |                      |                              | s                   | SMALL ENTITY    |                   | OR                     | OTHER<br>SMALL |                     |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGH<br>NUM<br>PREVI |                              | PRESENT<br>EXTRA    |                 | RATE              | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | . 29                                      | Minus                                   | <b>*</b> ~           | 15                           | = /                 |                 | X\$ 9=            |                        | OR             | X\$18=              |                        |  |
|  | Independent  | · 2                                       | Minus                                   | ***                  | 3                            | =                   |                 | X42=              |                        | OR             | X84=                |                        |  |
| <u> </u>   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEF                             | ENDEN                | CLAIM                        |                     | ' [·            | +140=             |                        | OR             | +280=               |                        |  |
|  |  | AD  | TOTAL<br>DIT. FEE                       |                      | OR                           | TOTAL<br>ADDIT, FEE |                 |                   |                        |                |                     |                        |  |
|  |  | (Column 1)                                |   | (Colu                | mn 2)                        | (Column 3)          | _               | ,OII. 1 LL        |                        |                |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA    |                 | RATE              | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                                   | **                   |                              | =                   | ]   :           | X\$ 9=            |                        | OR             | X\$18=              |                        |  |
| AME  | Independent  | *<br>NTATION OF M                         | Minus                                   | ###                  | T CLAIM                      | <u> -</u>           | $oldsymbol{L}$  | X42=              |                        | OR             | X84=                |                        |  |
| <u> </u>   | rinoi Fricoc   | INTATION OF M                             | OLI IT LLE DEI                          | LINDLIN              | CDAIN                        |                     | J [             | +140=             |                        | OR             | +280=               |                        |  |
|  |  |   |   |                      |                              |                     | AD              | TOTAL<br>DIT. FEE |                        | OR             | TOTAL<br>ADDIT. FEE |                        |  |
|  |  | (Column 1)                                |   |                      | mn 2)                        | (Column 3)          | _               |                   |                        |                |                     |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA    |                 | RATE              | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                                   | **                   |                              | a .                 | ] [:            | X\$ 9=            |                        | OR             | X\$18=              |                        |  |
|  | Independent  | *   | Minus                                   | ***                  | T 01 411                     |                     | <del></del> ┨╏╴ | X42=              |                        | OR             | X84=                |                        |  |
| Ļ  | PIHST PRESE  | NTATION OF M                              | ULTIPLE DE                              | ENUEN                | I CLAIM                      |                     | <b>4</b>   [,   | +140=             |                        | OR             | +280=               |                        |  |
| 11.0<br>0.01   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                      |                              |                     |                 |                   |                        |                |                     |                        |  |